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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	10690/T/B/A	Total Pages	
	First Named Inventor or Application Identifier			
	Berend Houwen			
	Express Mail Label No.	EM352400262US		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Specification (Total Pages <input type="text" value="23"/> (preferred arrangement set forth below)<ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets <input type="text" value="7"/> [Total Pages <input])<="" div="" type="text" value="23"/><div>4. Oath or Declaration (Total Pages <input type="text" value="23"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) (Note Box 5 below) i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</div><div>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</div><div>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</div><div>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies</div></div>	
ACCOMPANYING APPLICATION PARTS <div>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</div> <div>10. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</div> <div>12. <input type="checkbox"/> Preliminary Amendment</div> <div>13. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</div> <div>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired</div> <div>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</div> <div>16. <input type="checkbox"/> Other:</div>	

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____/_____

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label: or ☐ Correspondence address below
(Insert Customer No. or Attach bar code label here)

NAME	Maurice B. Stiefel, Esq.				
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the utility patent application of Inventor(s):

For: **METHOD FOR CLASSIFYING AND COUNTING LEUKOCYTES**

1. ☒ The application has 23 pages (including claim pages, and abstract).
2. ☒ 7 sheets of drawing are enclosed. The drawings are:
 - a. ☐ formal; or
 - b. ☒ informal; formal drawings will be submitted in due course.
3. ☒ The declaration and power of attorney
 - a. ☐ has been executed by all the inventors; or
 - b. ☒ has not been executed by all the inventors. A signed declaration and power of attorney will be submitted in due course.
4. ☐ An associate power of attorney is enclosed.
5. ☐ An assignment of the invention to _____ and a Recordation Form Cover are enclosed. Please record the Assignment and return it to the undersigned. A duplicate copy of this paper is enclosed.
 - a. ☐ A check for \$40.00 to cover the recording fee is enclosed. See paragraph 10.c., below.
 - b. ☐ Please charge the recording fee to our Deposit Account No. 02-4467. A duplicate copy of this paper is enclosed.
6. ☐ Priority is hereby claimed under 35 USC 119 based on Appln. No. _____, filed _____, 19____, in the European Patent Office.
 - a. ☐ A certified copy of each of the priority documents is enclosed.
 - b. ☐ The certified priority document(s) will follow.
7. ☐ A verified statement to establish small entity status under 37 CFR Section 1.9 and 37 CFR Section 1.27 is enclosed.
8. ☒ The filing fee is calculated below.

For	Col. 1 No. Filed		Col. 2 No. Extra	Small Entity Rate Fee	or	Other Than A Small Entity Rate Fee
Basic Fee:				\$ 385	or	\$ 760
Total Claims:	11 -20=	x		x11=	or	x18=
Indep. Claims	1 - 3=	x		x40=	or	x78=
[] Multiple Dependent Claims Presented				+ 130 =	or	+ 260 =
Total: \$760.00						

*If the difference in Col. 1 is less than zero, enter "0" in Col. 2.

- a. [x] A check for \$760.00 to cover the filing fee is enclosed. See paragraph 10a and 10d, below.
 - b. [] Please charge Deposit Account No. 02-4467 in the amount of \$____. A duplicate copy of this paper is enclosed.
9. [] A Preliminary Amendment is enclosed.
- a. [] No additional fee is due.
 - b. [] A check in the amount of \$____ to cover the cost of additional claims is enclosed. See paragraph 10.a., below.
 - c. [] Please charge our Deposit Account 02-4467 in the amount of \$____. A duplicate copy of this paper is enclosed.
10. [x] The Commissioner is hereby authorized to charge payment of the following fees associated with this application or with recording any Assignment concerning it, or to credit any overpayment, to Deposit Account No. 02-4467, unless otherwise paid by check.
- a. [x] If our check is missing or otherwise insufficient, or if any additional fees are required, the Commissioner is authorized to charge (or credit any overpayment) to Deposit Account No. 02-4467. A duplicate copy of this paper is enclosed.
 - b. [x] Any additional filing or other fees required under 37 CFR Section 1.16, including any fees for presentation of extra claims.
 - c. [x] Any patent application processing fees under 37 CFR Section 1.17.
 - d. [x] Any additional Assignment recording fees under 37 CFR Section 1.21(h).

Note: See 37 CFR ' 1.311(b) regarding authorization to pay the issue fee from deposit account.

- c. ☒ Any patent application processing fees under 37 CFR Section 1.17.
- d. ☒ Any additional Assignment recording fees under 37 CFR Section 1.21(h).

Note: See 37 CFR ' 1.311(b) regarding authorization to pay the issue fee from deposit account.

11. ☒ An Information Disclosure Statement is enclosed.

Respectfully submitted,

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09/02/99
JCS44 U.S. PTO

A

Docket No.: 10690/T/B/A

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)

Berend Houwen, Fu-sheng Wang, Hiroyuki Fujimoto,)
Takashi Sakata, and Yukio Hamaguchi)

Filed Concurrently Herewith On September 1, 1999)

For: **METHOD FOR CLASSIFYING AND COUNTING LEUKOCYTES**

CERTIFICATE OF EXPRESS MAILING

"Express Mail" Mailing Label No.: EM352400262US

Date of Deposit: September 2, 1999

I hereby certify that the following:

- ☒ This Certificate of Express Mailing
- ☒ Utility Patent Application Transmittal - Form PTO/SB/05 (1 p.)
- ☒ Letter of Transmittal of Utility Patent Application (3 pp. in duplicate)
- ☒ Original Patent Application (23 pp.)
- ☒ Fee Transmittal Form (1 p.)
- ☒ Check in the amount of \$760.00 for filing fee of patent application
- ☒ 7 Sheets of Informal Drawings
- ☒ Information Disclosure Statement (2 pp.)
- ☒ Form PTO-1449 (1 p.)
- ☒ References cited in the Information Disclosure Statement
- ☒ Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the Date of Deposit indicated above in an envelope addressed to the Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

Darryl Terrell

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09/30/99